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JUN 26 2006

DATE: June 26, 2006
FAX #: 1-571-273-8300, Art Unit - 3637
TO: Examiner – Paul D. Devoti
FROM: Diann Herring, Assistant to Michael Starkweather
RE: Response to Office Action due on July 5, 2006

Number of Pages including cover page:

Docket No. 3053.2.1 NP
Client Bryan Buchi
Serial No. 10/826,990 Filing Date 04/19/2004
Assignee/Mark _____
Date Faxed June 26, 2006

Please acknowledge receipt of:

- ☐ Amendment
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- ☐ Assignment ☐ Cover Sheet ☐ Fee
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- ☒ Response to Office Action – 9 PAGES
- ☐ Response to Advisory Action – PAGES
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- ☐ _____
- ☐ _____
- ☐ _____
- ☒ ATTORNEY: MWS – 34,441

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/826,990	RECEIVED CENTRAL FAX CENTER JUN 26 2006
	Filing Date	04/19/2004	
	First Named Inventor	Bryan Buchi	
	Art Unit	3837	
	Examiner Name	Paul D. Devoti	
Total Number of Pages in This Submission	11	Attorney Docket Number	3053.2.1 NP

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): — Fax Cover Form for OAR
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Starkweather & Associates / Cust. # 48309	
Signature	<i>Michael W. Starkweather</i>	
Printed name	Michael W. Starkweather	
Date	June 26, 2006	Reg. No. 34,441

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Signature	<i>Diann Herring</i>		
Typed or printed name	Diann Herring	Date	June 26, 2006

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PATENT APPLICATION
Docket No.: 3053.2.1 NP

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s):	Buchi, Bryan	
App. No.:	10/826,990	Art Unit: 3637
Filing Date:	19 April 2004	Examiner: Devoti, Paul D
For:	A WINDOW WELL LINER	

RESPONSE TO OFFICE ACTION

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

In response to the Examining Authorities Written Action, mailed 5 April 2006,
applicant respectfully submits the following amendments and remarks.